

AND POWER OF ATTORNEY  
(Patent, Design, or C-I-P Application)

JONES DAY 3.0-001 FWC

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PRODUCTION OF HUMAN PARATHYROID HORMONE FROM MICROORGANISMS



A specification of which

is attached hereto

dated on 09/08/89

as Application Serial No. 07/404,970

and was amended on (if applicable)

was described and claimed in International Application No. filed and as amended on (if any)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

PRIOR FOREIGN APPLICATION(S)

COUNTRY	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 U.S.C. 119
			YES <input type="checkbox"/> NO <input type="checkbox"/>
			YES <input type="checkbox"/> NO <input type="checkbox"/>
			YES <input type="checkbox"/> NO <input type="checkbox"/>

LISTING OF FOREIGN APPLICATIONS CONTINUED ON PAGE 2 HEREOF: ☐ YES ☐ NO

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

06/921,684

October 22, 1986

abandoned

(Application Serial No.)

(Filing Date)

(Status)  
(patented, pending, abandoned)

07/393,851

August 14, 1989

pending

(Application Serial No.)

(Filing Date)

(Status)  
(patented, pending, abandoned)

I further attest that we intend to rely on the application as originally filed without use of Figures 13, 14 and 20 or reference thereto.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Lawrence I. Lerner, Reg. No. 19,516; Sidney David, Reg. No. 22,768; Joseph S. Littenberg, Reg. No. 20,832; Arnold H. Krumholz, Reg. No. 25,428; William L. Mentlik, Reg. No. 27,108; John R. Nelson, Reg. No. 28,573; Roy H. Wegner, Reg. No. 28,350; Stephen B. Goldman, Reg. No. 28,512; Paul H. Kochanski, Reg. No. 29,660; Maxim H. Waldbaum, Reg. No. 26,244; Marcus J. Millet, Reg. No. 28,241; Bruce H. Sales, Reg. No. 32,793; Jack Posin, Reg. No. 19,209; Daniel H. Bobis, Reg. No. 16,694; Peter J. Burch III, Reg. No. 32,203; Keith E. Gilman, Reg. No. 32,137; and Robert B. Cohen, Reg. No. 32,768

SEND CORRESPONDENCE TO:

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Westfield, New Jersey 07090

DIRECT TELEPHONE CALLS TO:  
(name and telephone number)

(201) 654-5000

201	FULL NAME OF INVENTOR	LAST NAME Gautvik	FIRST NAME Kaare	MIDDLE NAME M.
	RESIDENCE & CITIZENSHIP	CITY Oslo	STATE OR FOREIGN COUNTRY Norway	COUNTRY OF CITIZENSHIP Norway
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Skovvn 17	CITY Oslo	STATE OR COUNTRY Norway
202	FULL NAME OF INVENTOR	LAST NAME Alestrom	FIRST NAME Peter	MIDDLE NAME
	RESIDENCE & CITIZENSHIP	CITY Sollihøgda	STATE OR FOREIGN COUNTRY Norway	COUNTRY OF CITIZENSHIP Sweden
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203	FULL NAME OF INVENTOR	LAST NAME Oyen	FIRST NAME Tordis	MIDDLE NAME Beate
	RESIDENCE & CITIZENSHIP	CITY Oslo	STATE OR FOREIGN COUNTRY Norway	COUNTRY OF CITIZENSHIP Norway
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Stordamvn 33	CITY Oslo	STATE OR COUNTRY Norway

LISTING OF INVENTORS CONTINUED ON PAGE 2 HEREOF: ☒ YES ☐ NO

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201*	SIGNATURE OF INVENTOR 202*	SIGNATURE OF INVENTOR 203*
DATE	DATE	DATE

SEE PAGE 2 ATTACHED, SIGNED AND MADE A PART HEREOF: ☐ YES ☐ NO

\*Where use of Page 2 of this Declaration is necessary, only Page 2 is signed.

PRIOR FOREIGN APPLICATION(S)			
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			YES <input type="checkbox"/> NO <input type="checkbox"/>
			YES <input type="checkbox"/> NO <input type="checkbox"/>

## LISTING OF APPLICANTS — CONTINUED FROM PAGE 1, AND MADE A PART HEREOF

204	FULL NAME OF INVENTOR	LAST NAME Gabrielsen 4-00	FIRST NAME Odd	MIDDLE NAME Stokke
	RESIDENCE & CITIZENSHIP	CITY Oslo	STATE OR FOREIGN COUNTRY Norway	COUNTRY OF CITIZENSHIP Norway
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Ullernvn 16	CITY Oslo	STATE OR COUNTRY Norway ZIP CODE 0280 2
205	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY ZIP CODE
206	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY ZIP CODE

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

	SIGNATURES OF APPLICANTS	DATE OF SIGNATURE
201	<i>Kjell M. Gunn Brick</i>	22 <sup>nd</sup> of October 1989
202	<i>Edvard</i>	23 <sup>rd</sup> of October 1989
203	<i>Tordis Beate Fjell</i>	24 <sup>th</sup> of October 1989
204	<i>Odd S. Gabrielsen</i>	24 <sup>th</sup> of October 1989
205		
206		